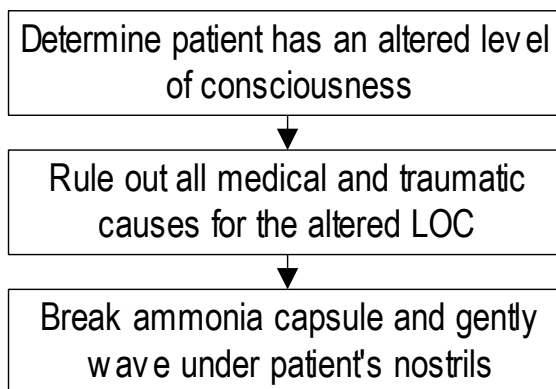


Initial: 5/10/00
Reviewed/revised:
Revision:

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
USE OF AMMONIA  
INHALANTS**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

<b>Purpose:</b>		<b>Indications:</b>	
To aid in the arousal of a patient with an altered level of consciousness		Patient who presents with an altered level of consciousness after other physical causes have been ruled out	
<b>Advantages:</b>	<b>Disadvantages:</b>	<b>Complications:</b>	<b>Contraindications:</b>
Aids in the arousal of a patient with an altered level of consciousness	May further irritate patient	Irritation of patient's airway	Patient is alert and oriented Medical cause for the altered level of consciousness has been established



**NOTES:**

- Rule out all medical and traumatic causes for altered level of consciousness **before** using ammonia inhalants.
- DO NOT insert ammonia inhalants into any orifice or place under oxygen mask.

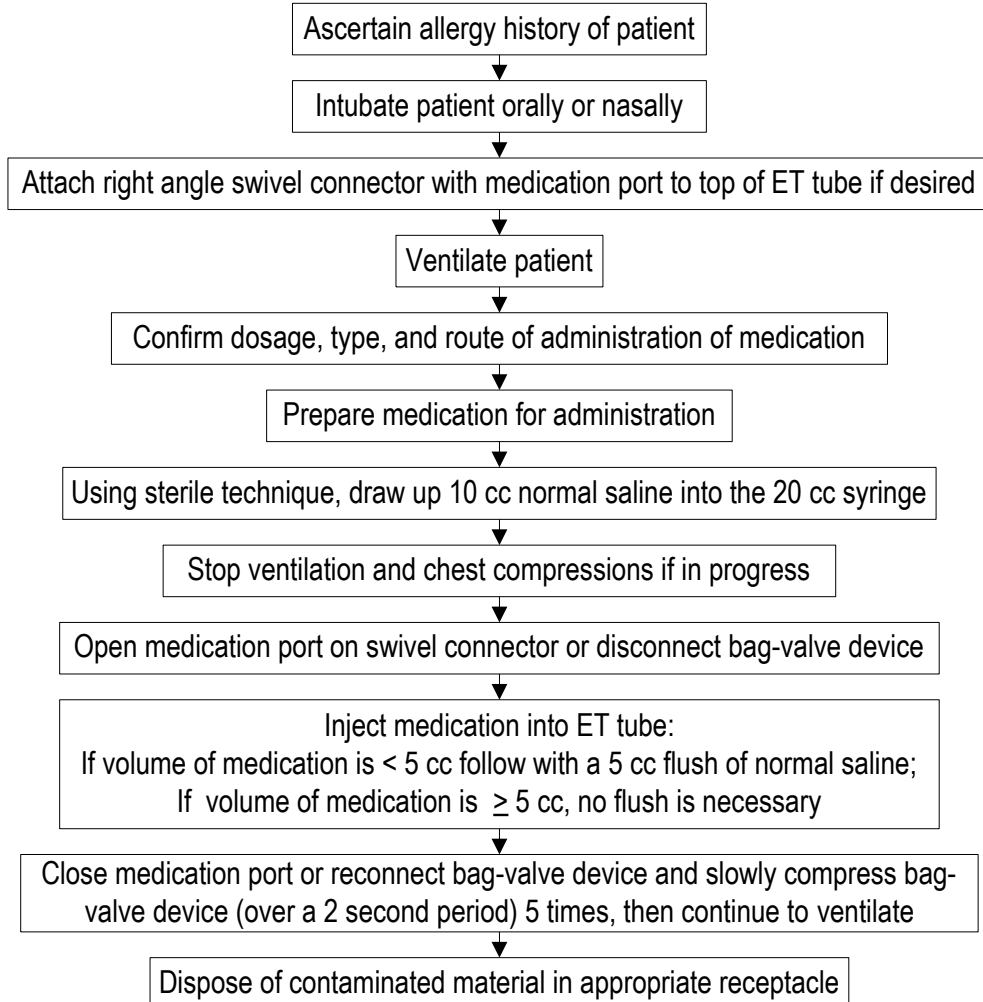
Initial: 9/92
Reviewed/revised: 6/1/05
Revision: 6

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
ENDOTRACHEAL**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

**ADMINISTRATION OF MEDICATION**

<b>Purpose:</b> To deliver medication to the alveoli of the lung for rapid absorption by the capillaries		<b>Indications:</b> Critically ill patient who is intubated but IV access is not available	
<b>Advantages:</b> Delivers medications rapidly to the circulatory system for distribution throughout the body Can be done without IV access	<b>Disadvantages:</b> ET must be in place Epinephrine and atropine dosages must be doubled Some of medication will adhere to the walls of the ET tube Not all medication may be administered via ETT Must stop CPR and ventilation to administer	<b>Complications:</b> Potential damage to lung tissue by the medication	<b>Contraindications:</b> Medication not approved for ET administration



**NOTES:**

- Medications approved for ET administration:
  - Naloxone, atropine, epinephrine, lidocaine.

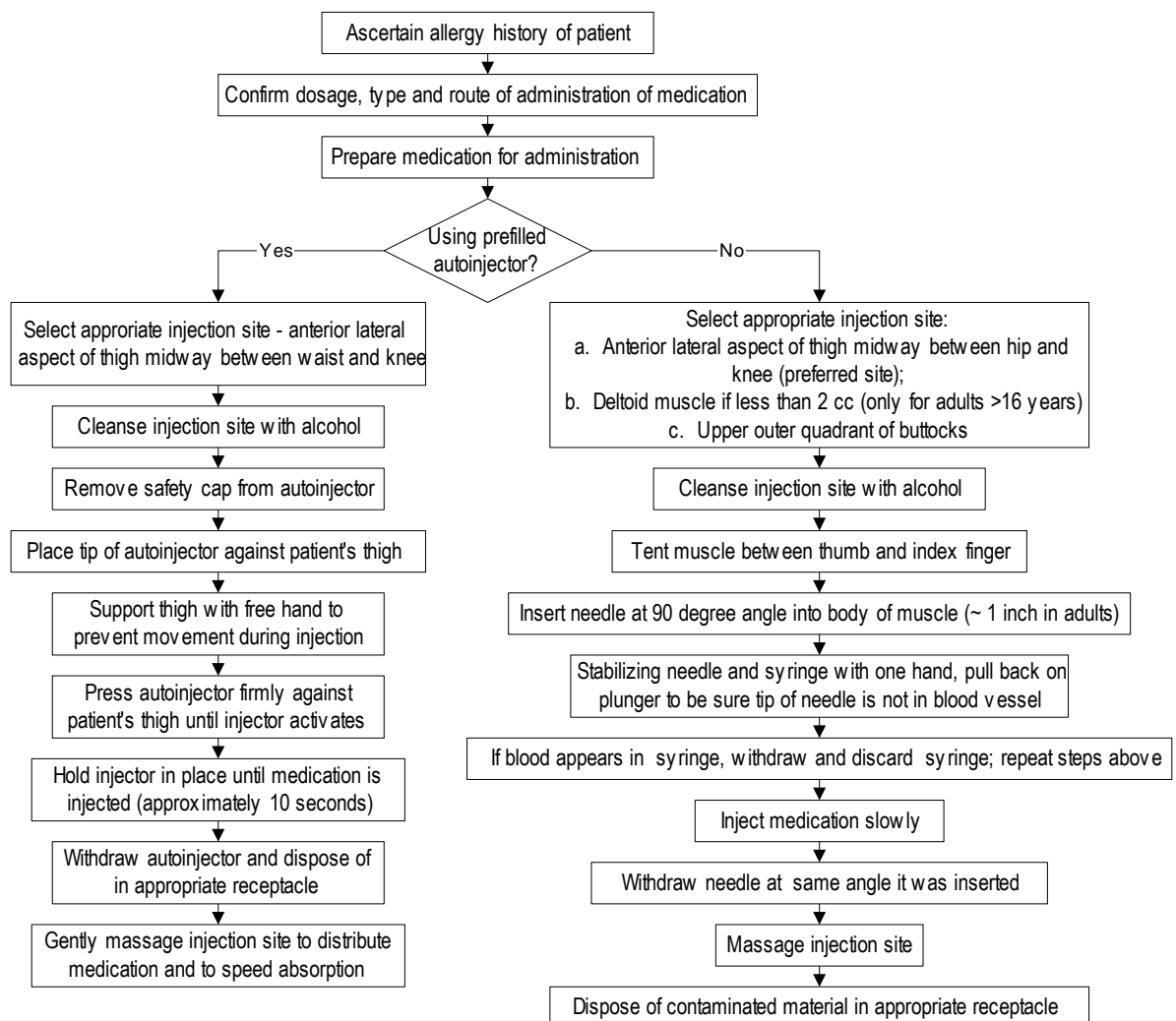
Initial: 9/92
Reviewed/revised: 2/17/10
Revision: 4

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
INTRAMUSCULAR**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

**ADMINISTRATION OF MEDICATIONS**

<b>Purpose:</b>		<b>Indications:</b>	
To deliver medication to the muscle tissue for absorption by blood vessels		For a patient who needs medication that may be administered via intramuscular route	
<b>Advantages:</b>	<b>Disadvantages:</b>	<b>Complications:</b>	<b>Contraindications:</b>
Delivers medication slowly to the circulatory system for distribution throughout the body Effects sustained for a period of time Does not require IV access	Pain at injection site Only small volumes (2 - 5 cc) should be given by this route Cannot give tissue-irritating medication by this route	Infection Accidental IV injection if tip of needle is in vein	Infection in area of injection



**NOTES:**

- The deltoid muscle should not be used as an injection site for patients less than 16 years old.
- No more than 2 cc of medication should be injected via intramuscular route.
- Absorption may be delayed in poor perfusion state. For an anaphylactic patient, consider IV/IO route if patient is in shock and does not rapidly improve with IM epinephrine.

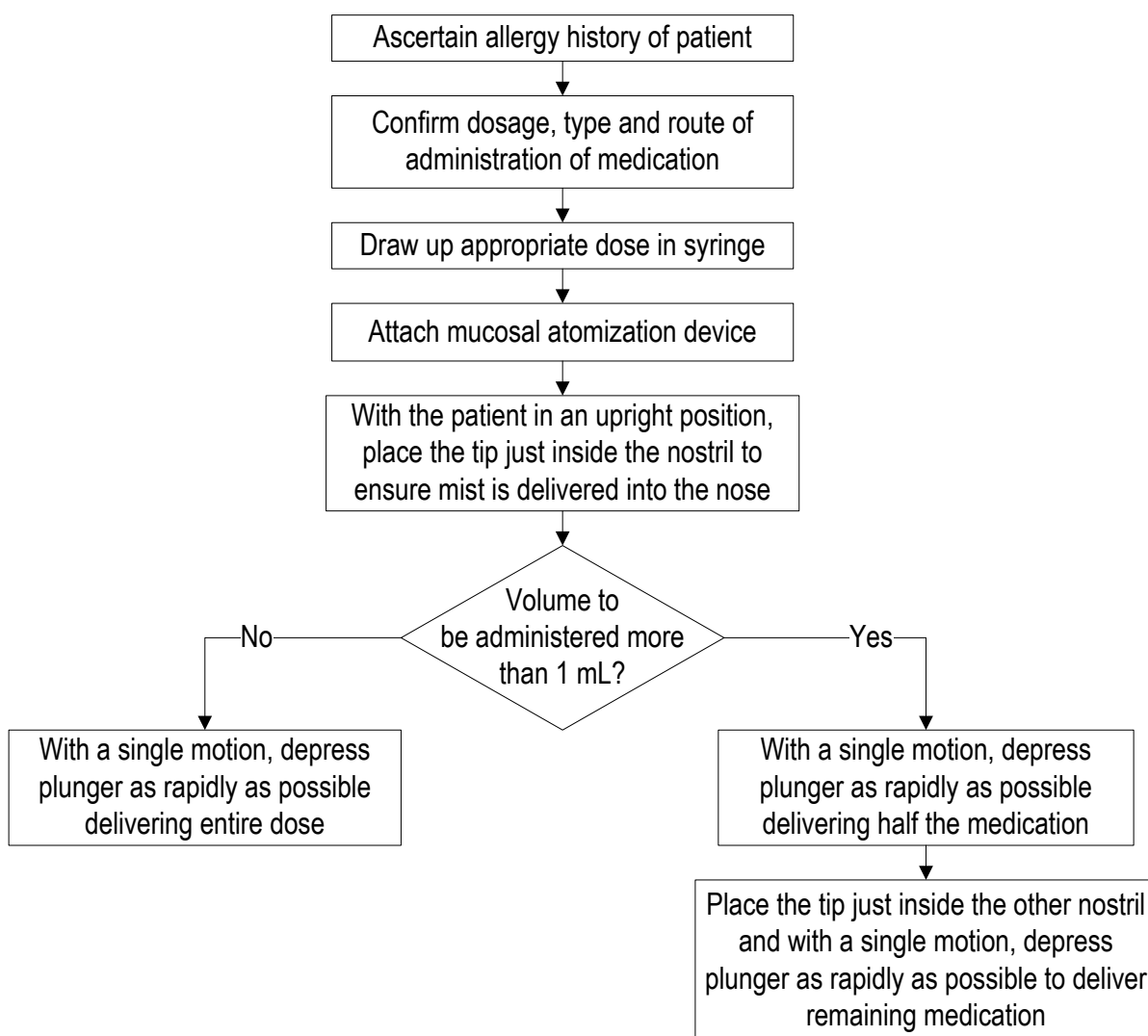
Initial: 2/17/10
Reviewed/revised:
Revision:

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
INTRANASAL**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

**ADMINISTRATION OF MEDICATIONS**

<b>Purpose:</b> To deliver a dose of intranasal medication for absorption		<b>Indications:</b> For a patient who needs medication that may be administered via intranasal route	
<b>Advantages:</b> Intranasal route is needleless	<b>Disadvantages:</b> Variable absorption Exposure to body fluids Limited dosing – only ½ to 1 mL / nostril	<b>Complications:</b> Nasal congestion Nosebleed	<b>Contraindications:</b> Uncooperative patient Nosebleed Extreme nasal congestion

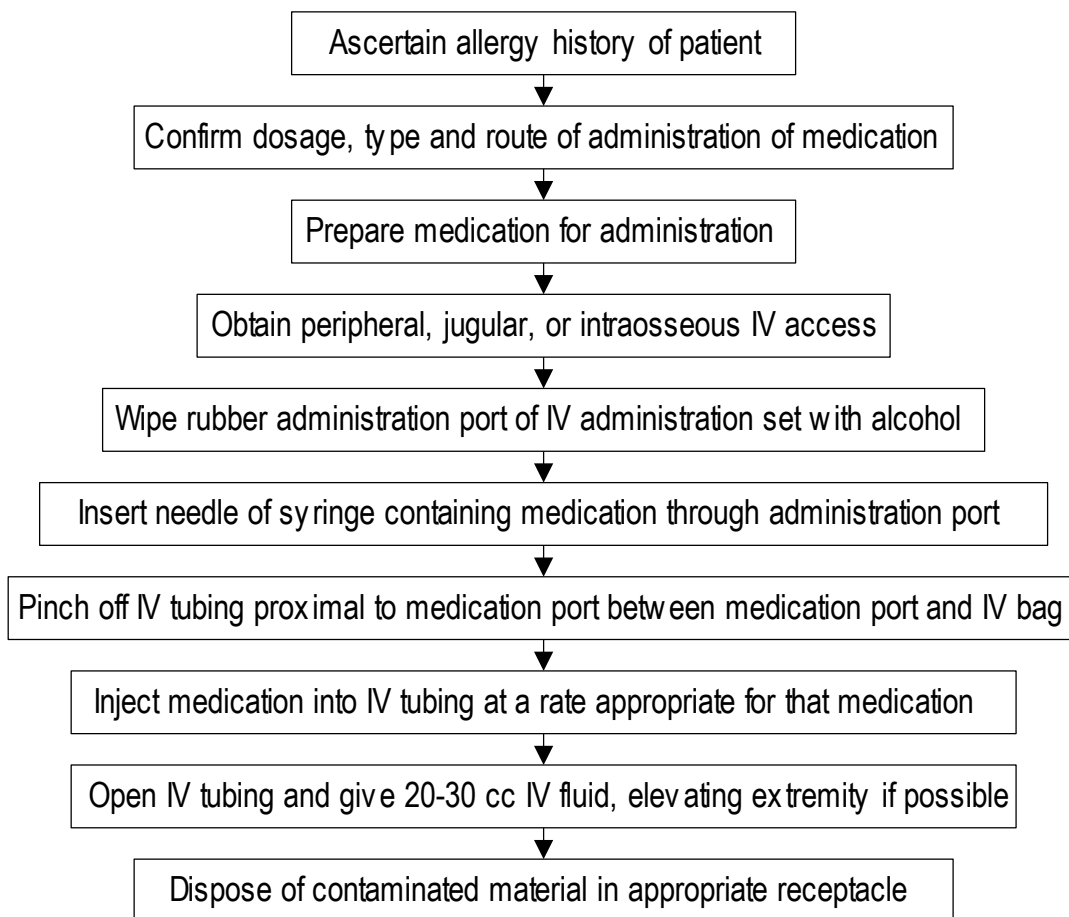


Initial: 9/92
Reviewed/revised: 5/10/00
Revision: 2

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
INTRAVENOUS BOLUS OF  
MEDICATION**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

<b>Purpose:</b>		<b>Indications:</b>	
To deliver medication directly into the blood stream for rapid distribution to the rest of the body		Patients with IV access who need medication administration	
<b>Advantages:</b>	<b>Disadvantages:</b>	<b>Complications:</b>	<b>Contraindications:</b>
Delivers medication rapidly to the circulatory system for distribution throughout the body	Must have IV access	Irritation to the vein by medication injected Extravasation of medication into subQ tissue if IV infiltrates	Infiltration of IV line Injury to the venous system proximal to the injection site

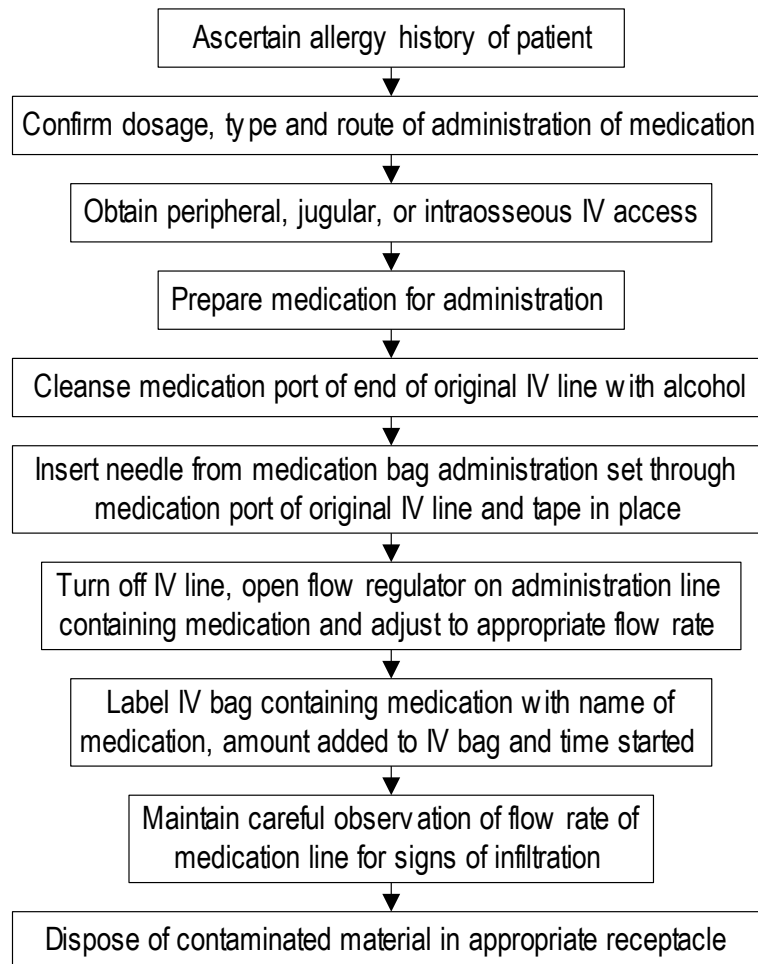


Initial: 9/92
Reviewed/revised: 2/14/01
Revision: 3

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
INTRAVENOUS DRIP  
ADMINISTRATION OF MEDICATION**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

<b>Purpose:</b> To maintain therapeutic blood levels of a medication over a period of time		<b>Indications:</b> Patients with IV access who need to maintain therapeutic blood levels of a medication	
<b>Advantages:</b> Delivers medications constantly and continuously to the circulatory system for distribution throughout the body Maintains a relatively constant blood level of medication	<b>Disadvantages:</b> Must have IV access Line must be monitored to assure constant rate of administration	<b>Complications:</b> Vein irritation by medication injected Extravasation of medication if IV infiltrates	<b>Contraindications:</b> Infiltrated IV line Injury to the venous system proximal to the injection site



**NOTES:**

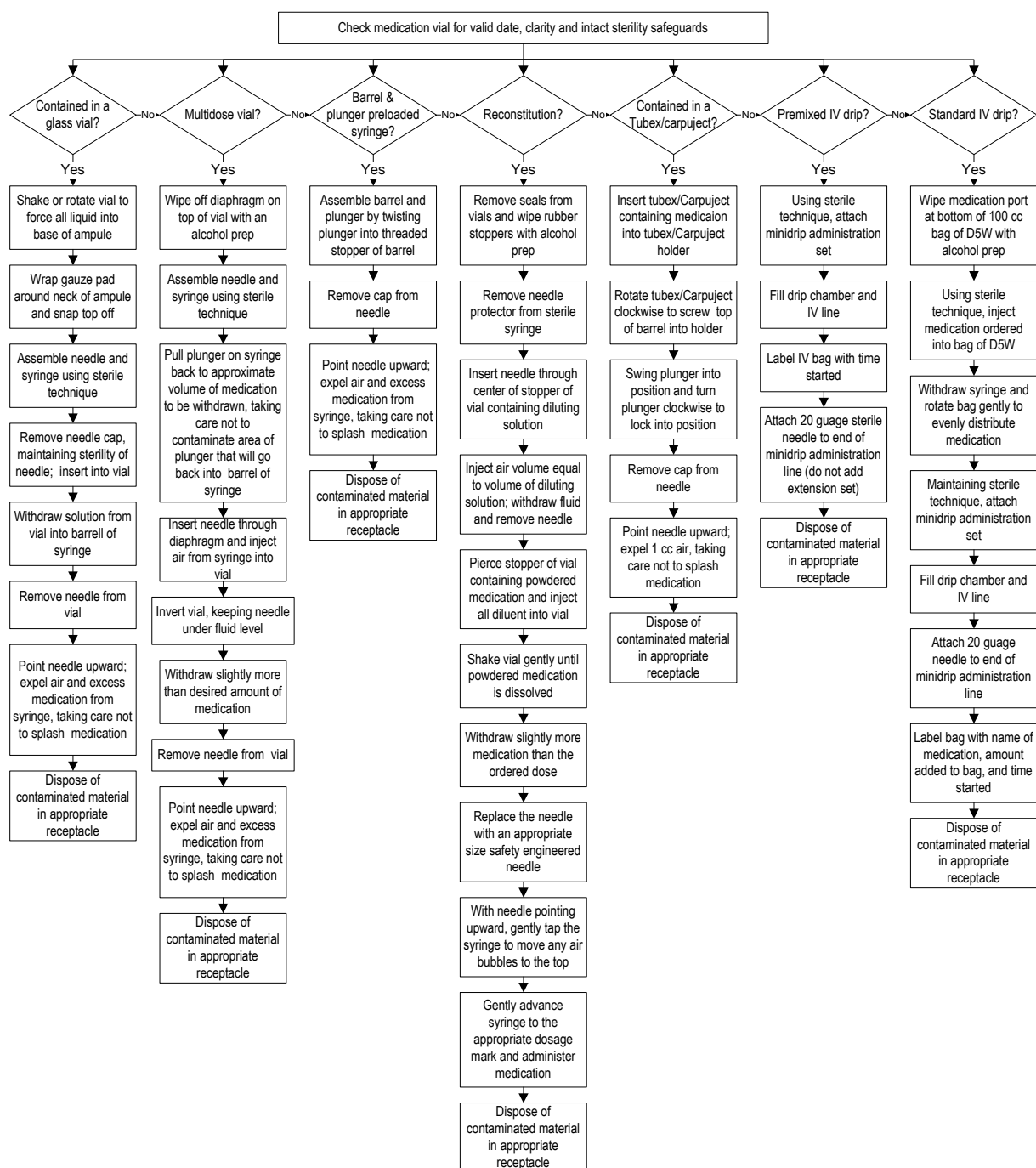
- Medications approved for IV drip:
  - Amiodarone, dopamine, lidocaine, sodium bicarbonate.

Initial: 9/92
Reviewed/revised: 2/16/11
Revision: 3

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
MEDICATION PREPARATION  
FOR ADMINISTRATION**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

<b>Purpose:</b> To prepare medication contained in a unit-dose syringe, glass vial, or multidose vial for administration		<b>Indications:</b> Any patient who needs medication administered	
<b>Advantages:</b> Medication can assist in prehospital treatment and stabilization of life-threatening conditions	<b>Disadvantages:</b> When given incorrectly or in the wrong dose, patient may be harmed	<b>Complications:</b>	<b>Contraindications:</b> Known allergy to the medication

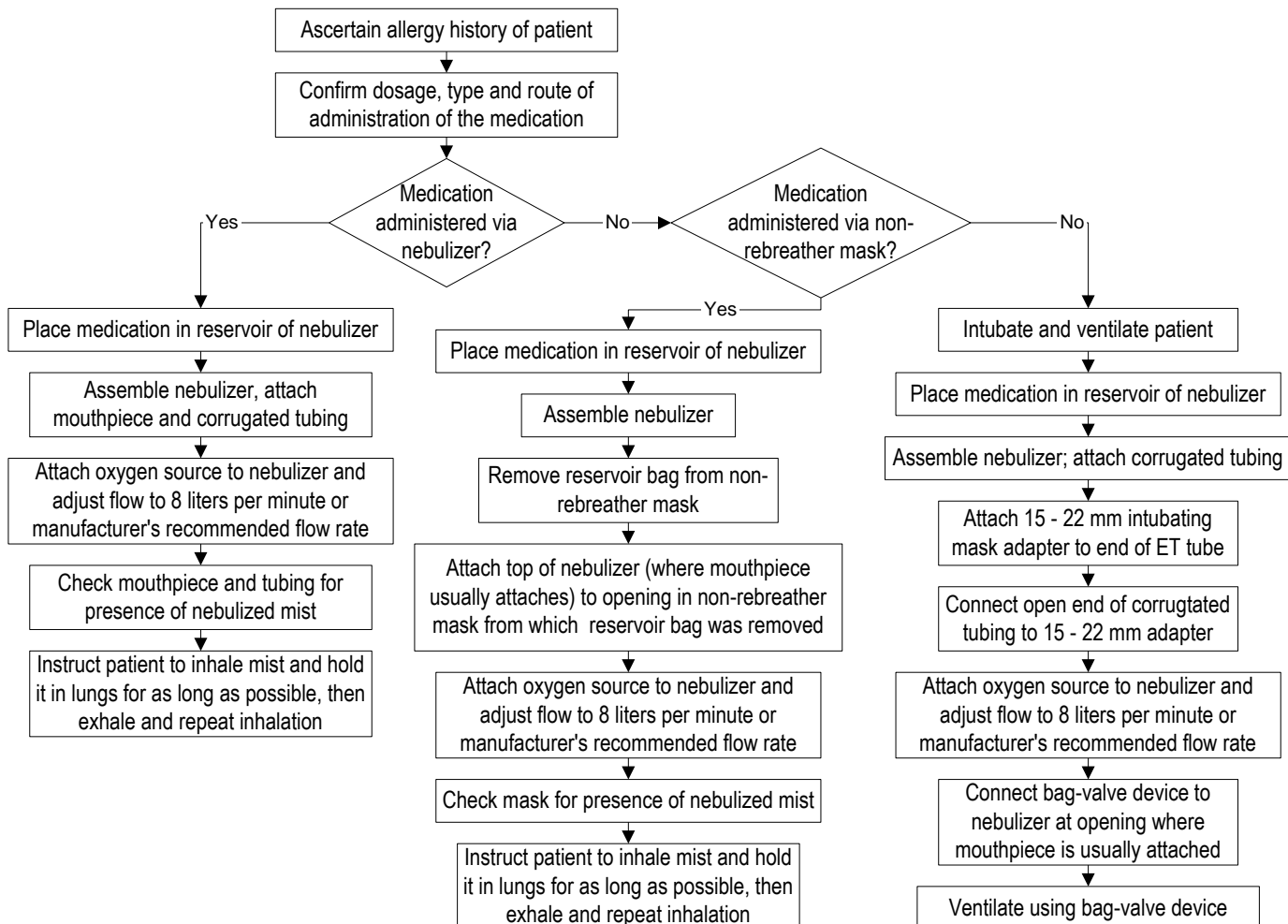


Initial: 9/92
Reviewed/revised: 5/21/08
Revision: 5

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
NEBULIZED ADMINISTRATION  
OF MEDICATION**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

<b>Purpose:</b> To aerosolize a medication and deliver it into the pulmonary system for absorption by the capillaries		<b>Indications:</b> Patients experiencing bronchospasm	
<b>Advantages:</b> Delivers medications rapidly to the circulatory system in the lungs Does not require IV access	<b>Disadvantages:</b> Patients in severe distress may not be able to follow directions or inhale a high enough tidal volume to receive sufficient medication to treat their condition Very few medications can be given this way	<b>Complications:</b> Tachyarrhythmia Ventricular ectopic beats	<b>Contraindications:</b> None



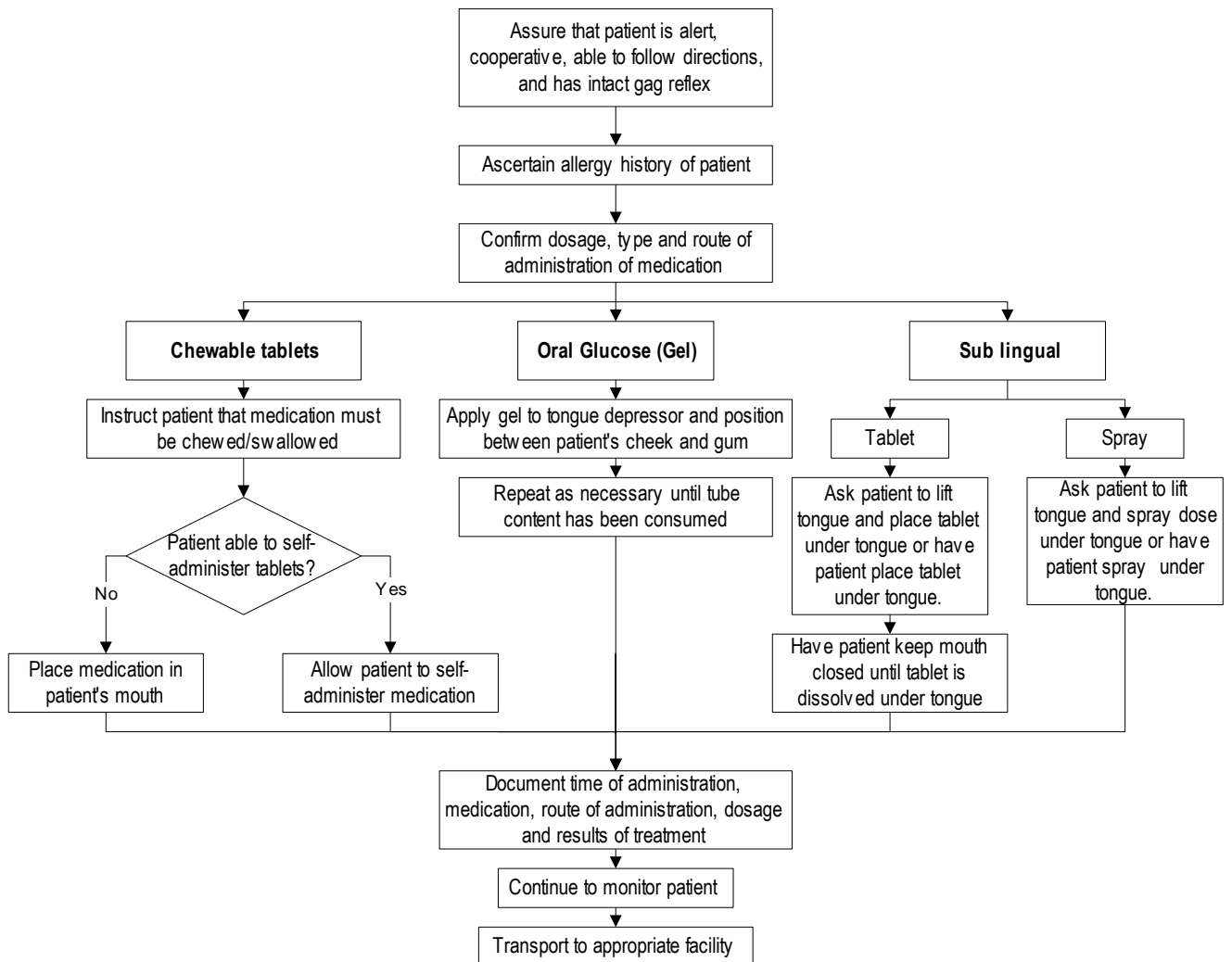


Initial: 12/6/00
Reviewed/revised:
Revision:

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
ORAL ADMINISTRATION OF  
MEDICATION**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

<b>Purpose:</b> To administer medication through the digestive tract.		<b>Indications:</b> Patient who is alert, cooperative, and is able to protect own airway and swallow the medication.	
<b>Advantages:</b> Can be done without IV access.	<b>Disadvantages:</b> Patient may vomit prior to absorption of the therapeutic dose.	<b>Complications:</b> Medication may cause stomach upset and/or vomiting.	<b>Contraindications:</b> Patient uncooperative, unable to follow directions, or lack of gag reflex.

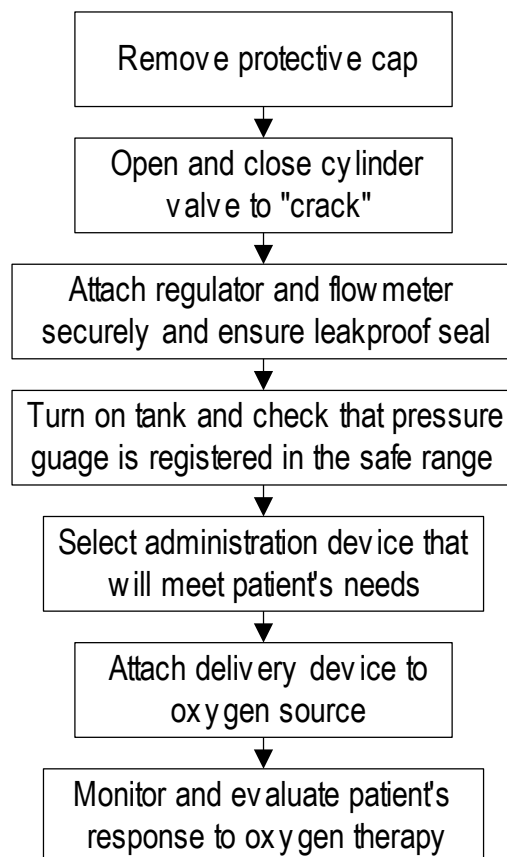


Initial: 9/92
Reviewed/revised: 5/10/00
Revision: 2

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
OXYGEN ADMINISTRATION**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

<b>Purpose:</b> To increase the partial pressure of oxygen in the lungs, providing additional oxygen to the tissues of the body		<b>Indications:</b> Patient showing signs of hypoxia	
<b>Advantages:</b> Increases oxygen availability to the tissue Minimizes effects of hypoxia and anaerobic metabolism on the cells	<b>Disadvantages:</b> Oxygen is stored under pressure Increases risk of fire when in use	<b>Complications:</b> May suppresses respiratory drive of a patient with COPD	<b>Contraindications:</b> None in prehospital care



**NOTES:**

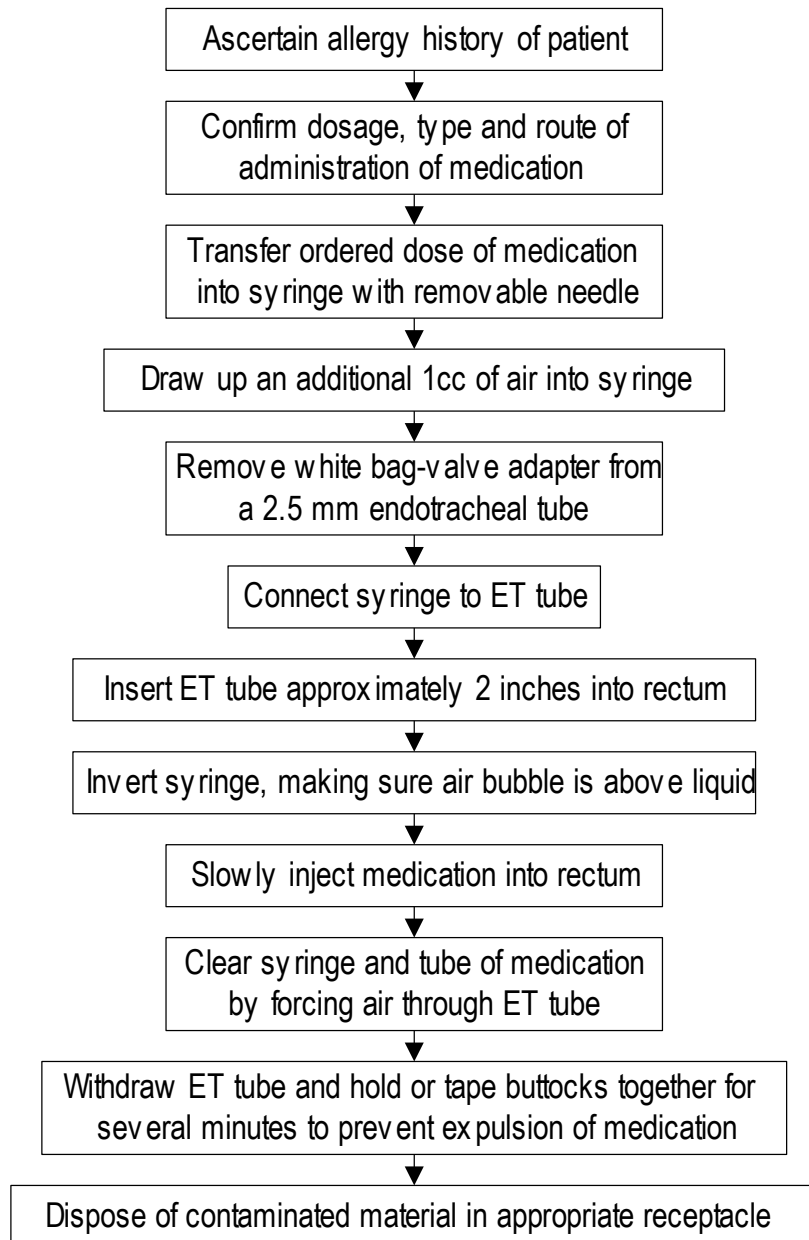
- The nasal cannula delivers 25% - 40% oxygen content at 1 - 6 liters/minute flow.
- The non-rebreather face mask delivers > 90% at 12 liters/minute flow.
- The bag-valve device delivers nearly 100% oxygen content when used with the oxygen reservoir attachment and maximum (15+ liters/min) flow.
- The nebulizer chamber for aerosol medications is run at 8 liters/minute or at manufacturer's recommended flow rate.

Initial: 9/92
Reviewed/revised: 5/21/08
Revision: 4

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
RECTAL ADMINISTRATION  
OF MEDICATION**

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
Page 1 of 1

<b>Purpose:</b> To provide a route of administration of selected medications in patients with no IV access		<b>Indications:</b> Actively seizing patient with no IV access	
<b>Advantages:</b> Delivers medications when no IV access is available Effects sustained over a period of time	<b>Disadvantages:</b> Uncertain absorption rate Uncertainty of medication retention	<b>Complications:</b> Trauma to rectal mucosa	<b>Contraindications:</b> Rectal bleeding Diarrhea Any known rectal abnormality



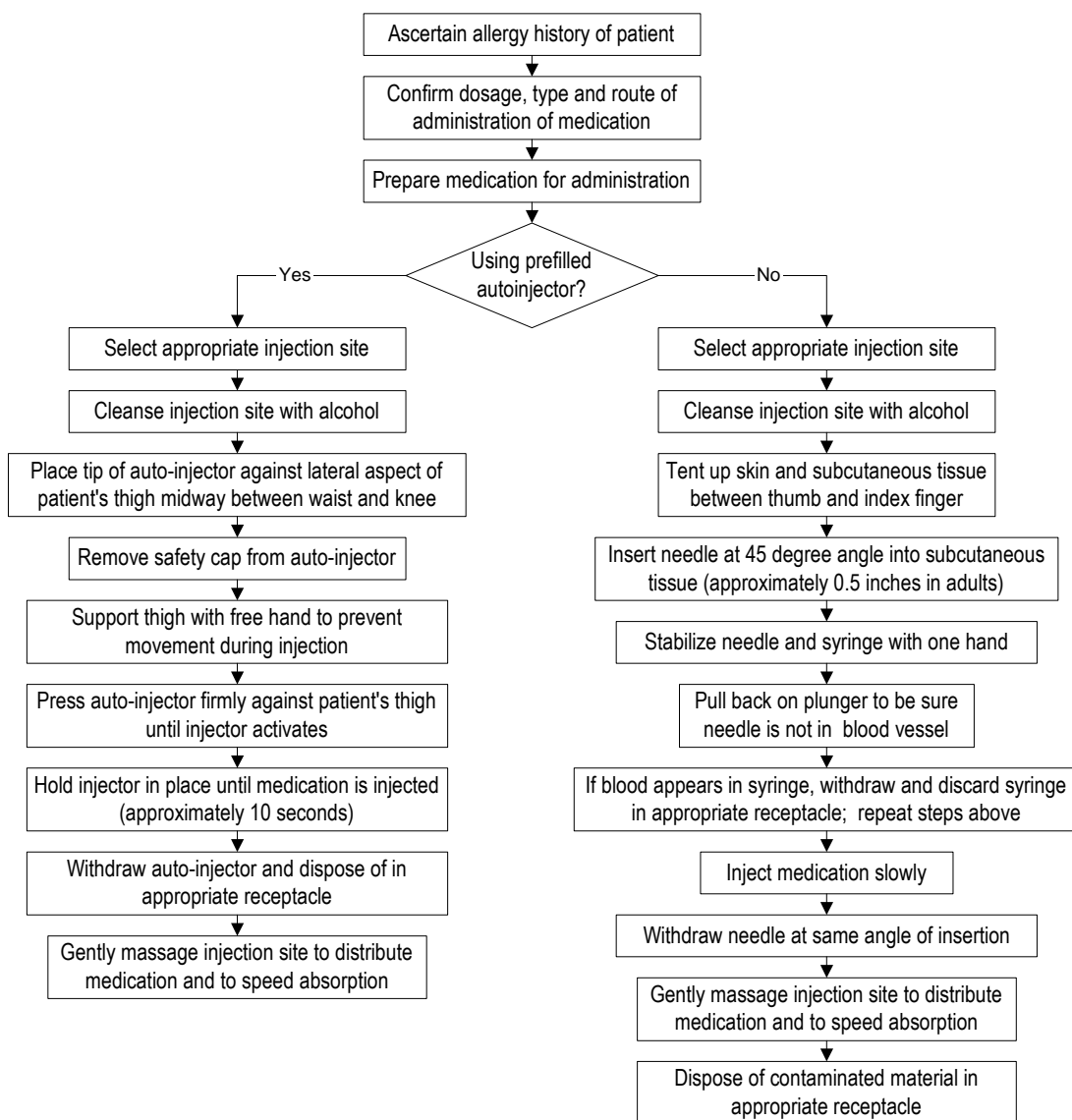
Initial: 9/92
Reviewed/revised: 2/16/11
Revision: 3

**MILWAUKEE COUNTY EMS  
PRACTICAL SKILL  
SUBCUTANEOUS**

Approved by: Ronald Pirrallo, MD, MHSA
Signature: _____
Page 1 of 1

**ADMINISTRATION OF MEDICATION**

<b>Purpose:</b> To deliver medication to the subcutaneous tissue for absorption by blood vessels		<b>Indications:</b> Anaphylaxis Severe respiratory distress due to bronchospasm	
<b>Advantages:</b> Delivers medication slowly for distribution throughout the body Effects sustained over a period of time Does not require IV access	<b>Disadvantages:</b> Pain Only 0.5 ml of medication may be administered subQ Cannot give tissue-irritating medication subQ	<b>Complications:</b> Infection Accidental IV injection if needle tip is in vein	<b>Contraindications:</b> Infection at injection site



**NOTES:**

- Hypotension is usually a contraindication for subcutaneous injections due to the lack of peripheral circulation to pick up medication.